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Lectures.

Etherization

Jan 20th 1904. Dr A. N. Broughton.

Ethyl-Oxide or Ether, as it is commonly called, is a derivative of Alcohol and Sulphuric acid. distilled.

In order to give the best results, Ether should be absolutely fresh, Kept in dark bottles in a cool place.

It is highly inflammable and being heavier than air settles to the floor, therefore all lights or fire should be overhead. A damp cloth should be placed over the cone if a cautery is being used.

Ether is a narcotic, it numbs the nerve endings in the respiratory passages, and also narcotizes the nerve ends in the mucous membranes. It is a heart stimulant, increasing the force and frequency of the pulse, and contractions of the heart, and is in general an excellent stimulant. It is also a heart depressant, but that depends upon the length of time given. In the first half hour it is a depressant. in the second half hour it is a stimulant, and in the third half hour a depressant.

The effect of ether on respiration is, first to stimulate, then to depress. The arterial tension is increased which has its effect upon people suffering from heart disease, or diseased blood-vessels.

Of the various anaesthetics, Ether is the safest. Chloroform is extremely dangerous. Gas is sometimes given previous to ether with good results.

All anaesthetics are dangerous and should be administered carefully.

Contrary indications for the giving of ether are :—

Organic brain diseases, Heart disease, Kidney disease, Lung diseases, Diabetes.

The urine should always be examined for Sugar and Albumen before ether is given.

There are two stages while under ether. "The Primary" which lasts about forty seconds. patient is usually confused, sometimes delirious. Alcoholics and hysterical people do not have a well marked primary stage.

In the second stage we have complete narcosis which lasts as long as Ether is given.

Preparation of patient :— The stomach and intestines should be empty; nothing should be given for six or eight hours before the time of etherizing. This is done to prevent vomiting, also that the abdomen may be perfectly flat.

The bowels should be emptied by means of enemata a few hours before the patient is etherized. the bladder also should be emptied

by means of catheter fifteen minutes before.

Milk should never be given before operations for when patient vomits, curds are apt to cause choking by getting into trachea.

Atropine is given, sometimes, to dry up secretions when patient is likely to have much mucus.

The patient should be encouraged as much as possible, as most patients have a dread of ether.

Success depends upon the first ten minutes.

The danger in increasing ether is vomiting. for should ether be forced while vomiting the patient is apt to contract bronchial pneumonia.

Heart failure is sometimes caused by prolonged etherization, symptoms :- pulse weak and rapid, breathing shallow and quiet, the colour is pallid or cyanotic.

The pulse should be counted every three or four minutes, a pulse running from 110 to 120 is usually good. The colour should always be watched carefully, as this tells a great deal.

A good etherizer keeps his patient as near the vomiting point as possible.

When heavily narcotized the pupils are dilated and do not contract when light is

admitted. A dilated pupil is also a sign of very little ether, but in this case the pupil contracts when light is admitted:

Administrations: —

There are two varieties of cones. air heavily impregnated with ether is the chief purpose of a cone.

Preliminaries of etherizing: —

With children it is kindness to give them plenty of ether, giving them a breath and then withdrawing it.

With the adult ether should be put on gradually as strong as can be taken.

Fifteen minutes is sufficient time for etherizing.

The jaw should be held in position, the colour watched carefully. if blue there is not enough ether.

Preparations for emergencies: —

A mouth-gag and tongue forceps should be always at hand, also the various heart stimulants in case of collapse.

The cone should be shaken before applying lest drops of ether should get into the eyes. the eyes should also be covered to avoid the danger of conjunctivitis.

Never etherize alone for fear of emergencies

Etherizing

February 9th 1906. Dr A. N. Broughton.

Attention to patient:- Care should be taken that patient has not any false teeth, or anything in the mouth that could be drawn down throat while under ether.

Patients who are likely to be noisy:- alcoholic, athelatic, nervous, excitable persons, or men who are inclined to be afraid. Never etherize alone for fear of emergencies.

Sounds in etherization:- noises sound more loudly to ether patient.

Administration of ether:- Start with a lot of ether, an ounce or an ounce and a half: fresh and strong at first. Hold cone off at first: gradually drawing nearer. If given too hurriedly causes coughing. this should be avoided.

Symptoms:- Dilated pupil is a symptom of very little ether, but it is also a sign of too much ether, in this case the pupil does not react when light is admitted.

The best symptom is the respiration: patient should breathe naturally, deep, free breaths. If running lightly and fresh ether is applied there is always a change in respiration.

Shallow breathing is a symptom of light ether. it is also a sign of too much. but in this case the pulse is more rapid, patient is

pale. Increased pallor and increased pulse.

Treatment of over Etherization :- Take off ether; Give Strychnia 1/20. Cocain, or Caffein. S.C. No alcohol, Brandy or Whiskey. Do artificial respiration. Pull out tongue. Have head and shoulders lowered: sending arterial blood to head.

Action of Morphine on the pupil is to contract it, which symptom means patient is well under ether. So that Etherizer must remember this if patient has had Morphia. Do not depend on any one symptom when etherizing.

Care of patient when coming out of ether:- Turn on side, with head lowered, so that mucus will not run down trachea. Keep well covered with blankets, do not expose to cold, for patients perspire greatly under ether. and are apt to take cold.

Pulse of patient rather weak about 1/2 hour after ether is taken off.

The Eyes should be washed out with Boracic Sol. after ether to avoid the danger of Conjunctivitis.

Ether was discovered in 1846

The skin and it's diseases

Dr A. P. Perry.

The skin is the outer covering of the body, and protects the sensitive parts beneath.

The colour varies in different individuals, which is due to the different characters of pigment cells, which lie in the deeper parts of the cuticle.

The skin is made up of two layers, the inner one, which is called "The cutis". or "true skin". and the outer, which is known as the "Epidermas cuticle" or "scarf-skin".

Skin diseases:- Of all the diseases of the skin 25 o/o come under the head of Eczema. It is common in all ages, from infancy to old age.

Symptoms:- Itching and burning sensations.

Eczema may be acute, or chronic. In chronic cases, the skin becomes exceedingly thickened, so that it is difficult to pinch up a fold of it. It is a disease of the thinner parts of the skin or flexures of joints, head and limbs, rather than of the trunk.

It is often difficult to make a diagnosis because of it's resemblance to other diseases especially Syphilis.

The local treatment must be soothing or stimulating according to need.

Acne :- A disease caused by inflammation of the sebaceous glands of the skin.

Causes :- Indigestion, constipation, menstrual disturbances and uncleanliness.

It is a disease of early adult life and does not occur in children and rarely in mature life. The pustules are most commonly found upon the face, neck, shoulders and chest. Never on palms of hands or soles of feet.

Urticaria, or Hives :- They are rapidly formed, the causes are both external and internal.

Treatment :- Cathartics, alcohol baths, and carbolic acid wash.

Ringworm :- A disease characterized by red scales 1/4 inch in diameter. If it spreads to the roots of the hair, it will cause death of hair.

Itch or Scabies :-

An inflammation of the skin caused by an animal parasite. It is highly contagious. Parts most infected are between the fingers and flexure side of wrist and elbows and the lower part of the abdomen.

The irritation caused by scratching sometimes brings on a form of Eczema.

Eruptions caused by drugs. internal

and external :—

Dermatitis. Caused by the chemical action of drugs applied to the skin

Arsenic. Is an irritant external and internal.

Belladonna. This eruption resembles that of Scarlet fever.

Bromides. Cause papules or pustules.

Chloral Causes red spots on skin.

Iodide, or Iodine Causes eruptions which resemble Small-pox, or Syphilis.

This is one of the most common, but the prognosis is always good.

Urine

Dr Howell.

Metabolism is a process of the body, whereby tissues and cells undergo chemical changes, both constructive and destructive.

The work of producing secretions, such as saliva, gastric juice and bile, and excretions, such as carbon dioxide and urea comes under the head of metabolism.

The skin excretes water, carbon dioxide, and some salts. The kidneys excrete urea, water, and salts the bowels water and salts, and the lungs carbon dioxide.

The kidneys are situated in the region of the twelveth dorsal vertebrae. They are four inches long, two inches broad, and one inch thick. They are roughly bean-shaped with a notch at one side, and are covered with a tough envelope of fibrous tissue, called, the capsule of the kidney.

There are two theories as to the formation and passing of urine. One is, that the kidneys simply form the urine. The other, that the cells form some important part in passing the urine to the ureters.

Urine depends for its changes, upon the tissue changes of the body, and of the kidney itself.

Abnormal urine does not necessarily mean

diseased Kidneys.

Normal urine is a clear, yellow liquid. Specific gravity 1.017. Sometimes after urine has cooled, there may be seen, a light cloud floating in it, which is composed of cells and mucus.

Main points to be observed in examination of urine:—

(1) Quantity passed in 24 hours. — 48 — 50 ℥
(2) Colour. Light straw
(3) Test for reaction Acid urine
(4) Specific gravity 1.017 — 1.025.
(5) Abnormal constituents. Sugar and Albumen

Test for reaction:-

When blue litmus paper dipped into urine, turns red, the urine is said to be acid. and when red litmus paper turns blue the urine is alkali. Normal urine does not change either paper.

The amount of urine passed, may vary in the same person. The greatest quantity is passed, during the afternoon, less in the morning, and least of all at night. The flow is increased after meals and after exercise. Nervous diseases increase the flow, while acute diseases, such as fever cause a small amount and a high colour.

When the quantity of urine is small,

the specific gravity is high, and vice - versa. If the quantity is small and specific gravity low, a serious condition is indicated; It is usually found just before death, or in kidney diseases.

In fever cases as much fluid as possible should be taken, so that the urine may not become concentrated.

A smoky, dark, red, urine is always abnormal, the colouring matter is either blood or bile.

The final test should be for Sugar and albumen between the ages of 16 and 18 years, albumen is sometimes found, but does not mean anything serious. It is also found after severe exercise.

Sugar in the urine is a symptom of Diabetes. a person having diabetes, passes large quantities of urine.

Urine for examination must be absolutely clean, and kept in a cool place to prevent fermentation.

Nervous diseases

Dr Fuller.

Neurasthenia, Hysteria, Hypochondriac, Melancholia, and Neurasthenoid States all come under the head of nervous diseases.

Neurasthenia is caused, by long worry or mental strain from great responsibilities or occupations, from irregularities in living, from poorly nourishing foods, and sometimes from intemperance of parents.

Symptoms :- Constipation, loss of appetite and nervousness.

Irritable symptoms :- General weakness, tired feeling, trembling of hands, eyes sensitive, sensitive spots on spine.

Mental symptoms :- Loss of memory, sleeplessness, ringing in ears, despondency, which may end in insanity.

Treatment :- The best thing is isolation. If possible patient should be taken from home and excluded even from friends; Not only physical, but mental rest is required.

Next to isolation, the diet is important. good, nourishing food should be taken. Then comes massage, to take the place of exercise and is a general tonic. Later the patient should be encouraged to take some physical

exercise, which should be taken in open air each day. If this is impossible the patient may be wheeled to the window, sheltered from draughts, and get the fresh air in that way.

Electricity and water treatments, are commonly used.

The nurse should try to occupy the mind of her patient. take away as well as possible, all consciousness of her illness. Nice readings and stories are sometimes very helpful.

Hysteria :- This is caused in a similar way as Neurasthenia, from shock, or sudden grief.

Symptoms :- Contraction of muscles, particularly of the throat, which causes Globis Hysteria.) Loss of voice. which is sometimes cured by a spark of electricity on the throat Sometimes it returns as suddenly as it disappears.

Occasionly stern discipline will have a good effect in Hysteria, but it would not in Neurasthenia.

Hypochondriac :- This is more common in men than in women. He may imagine he has all kinds of diseases, when there is really nothing the matter with him.

One thing gets on his mind, clothes, food or self and he talks of and can think of nothing else.

Treatment :- Try to give him more pleasant things to think of. Induce him to think differently of these things. but most important of all is, rest and quietude.

Melancholia :- The patient in this case is likely to be suicidal. which calls for prompt watchfulness on the part of the nurse. The nourish-ment of such a patient is very important, sometimes they refuse to eat. If the diet cannot be forced. the stomach tube must be used.

The patient should not be urged to travel, nothing attracts her attention, it is better to settle down in some healthy place.

Neurasthenoid States :- Similar to neurasthenia, and like it has varied symptoms.

Treatment :- Rest, fresh air, isolation, and nourishing food. Milk may be given with lime-water 1/3, barley water, or coffee. Milk with Hydrochloric acid dilute, five or ten drops may be given. Give two quarts of milk the first day and gradually increase, until three or four quarts is given in every twenty-four hours. Then follow with chops and steak.

Massage is very benificial in this case. begin by massaging for five minutes at a time, increasing the time each day, until an

hour is given each time. Electricity may be given to strengthen the nerves.

Encourage the patient with the hope of recovery, this is a great stimulant. Teach him healthy habits instead of invalid habits.

It is rarely helpful to scold. The nurse should be sympathetic but never sentimental.

Obstetrics

Lecture I ..... Dr. H. Broughton.

Obstetrical nursing includes three classes, Medical, surgical and infant.

A pregnant woman should engage her Dr and nurse about the second month, and everything should be in readiness at least a month before expected time.

The usual way to tell when birth of baby may be expected is. to count back three months from date of last monthly flow, and add seven days.

There are three different kinds of signs of pregnancy:- Suspicious, Probable and Positive.

Suspicious Signs:- Nervousness, vertigo, irritability, craving for food, and morning sickness

Probable signs:- Absence of monthly flow, enlarged breasts, enlarged abdomen, blue vagina, dark circle around nipple and quickening.

Enlargement of abdomen does not become noticeable until the third or fourth month, and then this is not a positive sign, it might be due to tumor. Absence of monthly flow may be due to anaemia.

Enlargement of the breasts is characteristic especially if areola is darkened and watery fluid can be pressed out.

Positive Signs :- When the foetal heart can be heard with Stethoscope.

During pregnancy, corsets, garters and heavy skirts should be avoided. Low heeled shoes should be worn. Diet should be simple and natural, not too much meat, plenty milk, water, fruit and cereals. No wines, or malts should be taken.

Exercise is very important, but should be moderate and gentle. Large crowds should be avoided or anything that would cause fatigue

Special attention must be given to the bowels during pregnancy. they should be kept in good condition by means of a laxative or an enema may be given occasion-ally.

The Kidneys are the weak point at this time. Urine should be examined once a month at first; later should be examined every week. Occasionally examine twenty-four hour amount for sugar and albumen. The amount of urine passed should be noted frequently, for if the patient is not passing enough there is great danger of convulsions.

The skin, also should be well cared for, tepid baths should be taken daily. as the skin throws off impurities

Obstetrics

Lecture II

Signs of miscarriage:- Discharge of blood, back-ache, low-down heavy pains.

The flow of blood may mean placenta is coming first. If the patient is flowing much she should be treated like any other haemorrhage case. Give vaginal douche 110 or 115°. Elevate hips, raise foot of bed. Give hot coffee by mouth, rub limbs with alcohol. All clots and discharges should be saved for the Dr's inspection.

A pregnant woman should particularly guard against miscarriage at the time when her monthly periods are due. The danger of miscarriage is greatest at the fourth and seventh months

Rupture of the membrane means delivery within a few hours. The patient should be put to bed for if water escapes it means dry labour.

Symptoms of Convulsions:- Twitching of muscles of face, persistent head-ache, supression of urine, defective eyesight.

Treatment:- Loosen clothing, put patient to bed as soon as possible, force water. Keep head cool and feet warm. See that bowels move freely. Salts may be given. The Dr should be called immediately.

In preparing a room for delivery all

unnecessary articles should be taken out.
A high, single bed should be prepared. Cover the bed with a rubber sheet over which a sterile sheet may be spread, then a small rubber sheet and a small sterile sheet which may be removed after.

There should be a basin for placenta a basin of hot and cold water and a basin of corrosive, a small cup of sterile water to wash the baby's eyes, sterile scissors, sterile tape one foot long, a basin of lysol.

A sterile sheet should be pinned around the patient for a skirt, the night dress being rolled under the arms. the skirt should open on the right side.

Oilcloth or rubber should be laid on the floor to protect it from spots.

Signs of approaching labour :—.
Swelling, Regular pains, Discharge of mucus tinged with blood.

Sometimes a patient has little crampy irregular pain but they can easily be distinguished from the true pains, by the irregularity. The <u>true pains</u> are <u>regular</u>.

The discharge tinged with blood is termed. "The show"

There are three stages of labour.
Stage of dilation, Expulsion of the baby,

Expulsion of placenta

Asepsis is very important in child-birth a patient may become infected as soon as labour begins. As soon as a patient is in labor, an enema should be given to empty the bowels thoroughly. Wash the body from below the breasts to the knees with green soap and sterile water, then corrosive. Wash vulva and anus (seperately)

For examination the patient lies on her back with knees drawn up. vulva washed with corrosive, pad left between labia, and a sterile pad applied.

During the first stage a cup of hot tea or coffee is very beneficial, a hot water bag to the feet and one to the back is very comforting

Vomiting sometimes occurs, but it is not dangerous.

The nurse should begins the charts as soon as she arrives

The patient must be cheered and encouraged and this is the nurse's duty.

In the first stage the pains are sharp while in the second stage. they are straining bearing down pains. During the first stage the patient may sit up.

Obstetrics.

Lecture III

There are two forces by which a child is born:- Contraction of the uterus, and contraction of abdominal muscles.

Pressure on the small of back, gives relief during labour, or if patient has a sheet to pull on, frequent bathing of hands and face is comforting

Give anaesthetics when pain is at its height taking care away immediately after. At this stage have everything ready in case of haemorrhage. Have hot douches. The nurse must be watchful as head comes through, watch rectum that no discharge escapes. It is at this stage Ether is given, being removed when head is through.

As soon as head comes, wipe eyes carefully & Solution in readiness, using a different sponge for each eye. Also wipe nose and mouth. Wrap baby in warm blanket, face exposed, on it's left side. When pulse stops in cord, cut about four inches from navel, (which should be tied in two places.) Care should be taken that cord is tied tightly or child will bleed to death. Cord should also be tied gently. This ends the second stage.

As soon as a child is born it should cry. If lungs do not expand it will die

Methods used to make child cry:— Slap on buttocks, hold by feet, splash a little water on body. If no response then bathe first in hot, then cold water. If respiration does not then begin, do artificial respiration.

Delivery of placenta:— Third Stage. The placenta is usually delivered 15 minutes to 1 hour after birth of baby. The nurse should watch the uterus, squeeze and massage it. If hard and round about the size of a child's head it is contracting properly. It is immediately above the pubic bone, and not reaching higher than the navel. The Dr should be told of the size of uterus and amount of flow. Pulse must be watched carefully, if it is 120,—dangerous.— if below 100. Fairly good. 80. good. If patient has returning pain. the uterus is contracting

Prep: for delivery of placenta:- Instruments:- scissors. and swaps. Twist placenta carefully. (Don't pull). until it comes easily. for particles may be left attached to uterus. After the birth of placenta the Dr should make a thorough examination that the placenta is whole. The Dr also makes an examination for laceration, put finger in rectum, pressing out. Keeping labia closed so that air does not enter the vagina.

For laceration the following instruments are needed:- Scissors, Artery holders, forceps, needles.

Corrosive douches should not be given before delivery, as corrosive effects mucous membranes. Lysol or sterile water is preferred. Corrosive may be used after.

Ergot ʒi. to ʒiss may be given after the third stage,

Care of the baby :— The baby should be oiled c Sweet oil or Benzoated lard. left for six hours. then washed c warm suds. Cord should be dressed c sterile gauze.

The baby's colour and respiration should be watched carefully. a sip of water will sometimes help respiration.

The Mother's pulse must be watched closely. Note if she is inclined to be restless. She should lie on her back for three hours. then may be turned on side, gently c pillow.

Lecture IV. "Obstetrics"

The milk comes to the breast about the third day. The child should be put to the breast after eight hours, to encourage the milk supply. also because the "Colostrum" which it gets from the breast, is a laxative. The child should nurse three or four times in twenty-four hours.

Care of the breasts:— The breasts should always be washed before nursing and after. and a little sterile vaseline applied to keep them in a good condition. After the third day baby should nurse every two hours during the day. and every four at night.

The sterile pads should be changed 2 or 4 hours. also after urinating, the parts being cleansed with Corrosive. 1— 3000. If there are stitches, care must be taken that they are kept dry. The nurse must wash. dry and powder parts thoroughly.

After labour there is a bloody discharge for the first day. Clots are abnormal, On the second and third days the lochia is mixed with serum, and after six days is colourless. There should be no odor.

The first passage of urine is important, If patient is unable to pass urine, hot fomentations should be applied. The sound of running water will sometimes cause them to urinate. Sterile water poured over vulva is helpful. If patient is carefully

raised, this will sometimes assist in carrying the flood. If absolutely necessary a catheter may be resorted to.

Diet:— Until milk comes, diet should be restricted to, Milk, gruel, broth, followed by Soft-boiled and dropped egg.

The bowels should move the third day after which more solid food may be given. Water should be given freely.

Castor Oil ℥i given late at night followed in six hours by an enema (for the bowels)

In ten or fourteen days patient may sit up Stand on feet fifteenth day, and at the end of three weeks, may go down stairs. During first week there should be no visitors, excitement should be avoided.

Tub baths ought not to be given to a child until umbilicus is healed. The baby should not be rubbed with towels but gently patted dry.

The umbilical dressing should be kept dry. The cord usually comes off on the sixth day.

The "Meconium", is the name given to the first movements of the baby's bowels Should there be any constipation, a small soap suppository will irritate the rectum sufficiently to cause a movement of the bowels. The bowels may also be flushed ē water, a rubber catheter being used, a coffee spoon of Castor Oil may be given

While there is scarcity of mother's milk

modified milk may be used or a wet nurse may be resorted to. Massage is helpful in producing milk the glands should be stimulated by drinking milk, sometimes absence of milk is due to lack of gland tissue. Tea, Coffee and beer lessen the milk supply.

The baby should be weighed every week and should be handled as little as possible. The mother's milk may be too rich in curd quantities or proteid which will be noticed by curds in faeces.

Treatment:— Give baby ℥ss of warm water before nursing, pump a little milk from breasts as the second milk is better. Reduce time of nursing to ten minutes.

Preparations of modified milk

1st week

Cream	℥ iv.
Milk Sugar.	
Lime water	℥ i.
Boiled water	℥ xv
	xx

2nd.

Cream	℥ ii
Milk	℥ ii.
L water	℥ i
Boiled water	℥ xv

3rd

Cream.	℥ i
Milk	℥ i
L Water	℥ i
B "	℥ xvii

4th

Cream	℥ v
L W	℥ i.
B W	℥ xiv.

3 to 4 weeks.

Cream ℥ vi

L W ℥ i.

B. W ℥ xiii

6 weeks.

Cream ℥ viii

L. W ℥ i

B. W ℥ xii

6 to 8 weeks:—

Cream ℥ vii

Milk ℥ i.

L W ℥ i

B W ℥ xi.

2 to 4 months:—

Cream ℥ viii

L. W ℥ i

B. W ℥ xi

Dissolve two tablespoons milk sugar in warm water, add cream and lastly Lime water

Age.	Ounces.
6 weeks.	3
8 "	3 1/4
3 mos	4
4 "	4 1/2
5 "	5 1/2
6	5 3/4
8	7
9	8
10	8 1/2
12	9.

Barley water is sometimes used instead of boiled water to modify milk in cases of diarrhoea
Oatmeal water is used for constipation.

The care of Children

Dr Bartol.

A nurse to care for children should have tact and good, common sense. The mother should be kept out of the sick room as much as possible, this must be done tactfully, so that she will not know that she is being kept out

The nurse must gain the confidence of the child, deal frankly ~~e~~ him, do not deceive or antagonize him, be frank, but firm.

The pulse, temp, respiration are not as valuable indications of the condition of children as they are of adults In infants and children they vary with simple causes, Many children have unexplained high temperatures, Indigestion or Constipation sometimes causes a rise in temperature, or they may have inflammation of the middle ear, when ear is carefully examined and ~~not~~ drum punctured, the temp drops

A high temperature is often the beginning of the eruptive fevers or Tonsilitis. If a child has a temperature and is cross and peevish, make a careful examination of the throat. The child may have tonsilitis

Sometimes peevishness in children is ascribed to teeth alone, which is often very unjust. It is well to make sure, before deciding to treat them for that alone

Convulsions is one of the most terrifying ills of childhood

Treatment :— Put child quickly in hot bath care being taken that the water is not too hot. If stomach and bowels are not empty give small soap suds enema to empty bowels and an emetic to empty stomach. Constipation is often the cause of convulsions. When the child is removed from bath, fold in a warm blanket keep it quiet in a warm room, care being taken that there are no draughts

The nurse should observe character of faeces & vomitus also quantity and frequency.

Give water freely to drink

Index.

			Page.
Jan 20. 1904.	Etherization. (1st year)	Dr A. H. Broughton.	1—4.
Feb 9. 1906.	Etherization (3rd year)	Dr A. H. Broughton.	5—6.
1904	The skin and ill diseases.	Dr. A. P. Perry.	9—11
1904.	Urine.	Dr. W. Howell	15—17.
1904.	Nervous diseases.	Dr. Fuller.	21—24.
	Obstetrics.	Dr. H. Broughton.	27—39
1904	The care of Children	Dr Barlow	41—42

Index

Page.